

Mail Application to:
List Coordinator
Administrative Office
Probate and Family Court Dept.
2 Center Plaza, Suite 210
Boston MA 02108

Application
to the
Probate and Family Court Department
for appointment as
Guardian *ad Litem*
in actions involving:

For court use only

Reviewed _____

Entered _____

Probate of Wills — G.L. c. 192, §§ 1B, 1C; Uniform Practice XXVI
Proceedings for arbitration or compromise by fiduciaries — G.L. c. 204, §§ 13, 14, 16, 18
Accounts and settlements — G.L. c. 206, §§ 24, 30; Complaint or Petition for Instructions

and for appointment as: **Commissioner** for insolvent estate — G.L. c. 198, § 2
Administrator — G.L. c. 192, § 1 *et seq.* **Trustee** — G.L. c. 203, §§ 4, 5, 12

CATEGORY

D

Name: _____
(Street and Number)

Firm Name: _____
(Street and Number)

Address: _____
(Street and Number)

(City or Town) (State) (Zip Code)

Telephone No. (_____) _____ B.B.O. # _____
(Area Code)

E-Mail Address _____

I certify that I was admitted to practice before the Supreme Judicial Court on _____,
that I remain in good standing to practice before the courts of the Commonwealth of Massachusetts, and that I have not
been convicted of any felony.

I further certify

☐ that I have at least three years of experience practicing probate law in the Probate and Family Courts of
Massachusetts, (one of the years may have been serving a term as a law clerk for the Probate and Family Court
Department), **or**

☐ that I have at least three years of experience as an Assistant Register in the Probate and Family Court,

and that I have the required experience and expertise to serve as a guardian *ad litem* in matters relating to probate of
wills and estates pursuant to G.L. c. 192, § 1 *et seq.* and Uniform Practice XXVI; in proceedings for arbitration or
compromise by fiduciaries pursuant to G.L. c. 204, §§ 13, 14, 16 and 18; in proceedings relating to accounts and
settlements pursuant to G.L. c. 206, §§ 24 and 30; in proceedings for appointment or replacement of trustees pursuant
to G.L. c. 203, §§ 4, 5 and 12; or to serve as an administrator pursuant to G.L. c. 192, or as a trustee pursuant to G.L.
c. 203, or as a commissioner for an insolvent estate pursuant to G.L. c. 198.

I have currently in effect professional liability insurance with coverage of \$100,000 or more. The insurance company
which issued the policy is:

(Name of Company)

The policy number is: _____
(Policy Number)

The limits of liability are: _____
(Limits of Liability)

I request and I **WILL** accept appointments from the following (not more than **four**) divisions of the Probate and Family
Court Department:

☐ Barnstable ☐ Berkshire ☐ Bristol ☐ Dukes ☐ Essex ☐ Franklin ☐ Hampden
☐ Hampshire ☐ Middlesex ☐ Nantucket ☐ Norfolk ☐ Plymouth ☐ Suffolk ☐ Worcester

I understand that I will be required each year, after 2001, to complete six hours of continuing legal education in the
probate field to remain on the list for these appointments. I agree that, if I am appointed as a guardian *ad litem*,
administrator, trustee or commissioner and a person with an appearance in the case requests a certificate of my
professional liability insurance, I will provide the certificate within seven days of the request. I understand that, to remain
on the list, I must mail to the List Coordinator each October, after 2000, a certificate of my good standing with the
Supreme Judicial Court dated that October.

I have attached to this Application a **copy of my resume** and a **certificate** of my good standing with the Supreme
Judicial Court. The certificate was issued not more than 30 days ago.

I certify under the penalties of perjury that all of the above information is true.

Date: _____

(Signature of Applicant)